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Capt. *Hoxton*, when at Anchor in *Chefeea-Peak* Bay, found the Latitude $37^{\circ} 29'$ N. Off *Cedar Point* in *Potuxon* River $38^{\circ} 7'$ N. Off *Cape Henry* $37^{\circ} 6'$ N. And in a Letter to Mr. *Elton* he declares, " That he observed with his Quadrant both " by the Sun and Stars, in all the various Sorts of " Weather he met with in his late Voyage to and " from *Maryland*, without regarding the Horizon, " with as great Exactness, as with *Davis's* Quadrant " when the Sun and Horizon were clear."

There was likewise put into the Hands of the Publisher, another Letter from one Mr. *Jobn Walton* to Mr. *Elton*, containing some Observations of the Latitude in *Leghorn* Road, and several of the Ports of *Spain*, which were found, after repeated Experiments, exactly to agree with the known Latitudes of those Places: Mr. *Walton* adds, That he made several Observations in his Passage Home, in hard Gales, and a great Sea, and when it was so hazy, that the common Quadrant was of no use, for want of an Horizon.

III. *A remarkable Case of a Gentlewoman who died of a Hydrops Ovarii, in the Thirty-third Year of her Age, after having been tapped Fifty-seven times. By Mr. John Belchier, Surgeon.*

IN the Year 1725, the Wife of Mr. *Newberry*, a Merchant in this City, complained of a Pain in her Left-Side, near her Groin, internally, which sensibly

sibly increased ; and perceiving a Swelling in that Part, she at first thought herself with Child ; but having other Symptoms not very common with gravid Women, she sent for a Physician, who immediately discovered it to be Hydropical, and after following his Prescriptions for some time, and finding little or no Benefit thereby, she sent for another, and so for a third and fourth ; and after between two and three Years fruitless Trial of proper Medicines prescribed by the Physicians, she growing very big and uneasy with her Burden, was advised to be tapped, to which she accordingly submitted : And on *May* the 6th, 1728, sent for Mr. *Chefelden*, who took from her between four and five Gallons of Water ; but in a Week or ten Days after the Operation she perceived her self to fill again, in which State she continued to the first Day of *July* following, when Mr. *Chefelden* tapped her again, and took from her about the same Quantity of Water as before ; and in this Manner she continued to fill and be tapped every third or fourth Week, from the 6th Day of *May*, 1728, to the 3d of this Instant *March*, 173 $\frac{1}{2}$, when she died, in the Thirty-third Year of her Age.

During the last Thirty-seven times of her Tapping, I constantly attended her with Mr. *Chefelden*, when she always (till the two last times) appeared very brisk and lively the whole time of the Water's running from her, and was not in the least sick or faint after the Discharge of the Water, as is usual ; and though she was a very thin emaciated Woman, she would frequently walk three or four Miles the Day before the Operation, and most commonly went abroad the third Day after it.

The Quantity of Water taken from her each time of Tapping was between four and five Gallons; and during the whole Fifty-seven times Tapping, there never was above a Quart, or two Quarts at most, different in the Quantity, 'till the two last times, at each of which the Quantity did not exceed two Gallons: But in the Intervals of these two last Operations, she was frequently troubled with Reachings to Vomit, which burst open the Orifice twice where she was tapped, and at each time discharged about six Quarts.

The Quantity of Water which was taken from her each time was always measured, and upon Computation the whole amounts to near Two hundred and fifty Gallons. The Water that was taken from her the two last times of Tapping was much more viscid than the former.

At times she frequently complained of a violent Pain on her Right Side, and a heavy aching Pain in the *Pelvis*. She had likewise a *Prolapsus Uteri*; and some time before her Death she could not expel her *Fæces* but with great Difficulty and Pain, and at the same time laboured under an Incontinency of *Urine*.

On *Monday* the 6th of this Instant I opened her in the Presence of her Physician, when I found the whole *Viscera*, from the *Diaphragm* to the *Ossa Pubis*, covered with a thick gelatinous Substance, which seemed to be membranous, which at its first Appearance I took for the *Omentum* in a putrified State; but after a farther Examination, I found it to be only the more viscid Parts of the extravasated Fluid, which could not be discharged by the Operation: After removing this, I found several Portions of a hard
schirrous

scirrhus Substance arising from the *Fundus* of the Stomach, one large Portion of which was inserted into that Part of the *Colon* near the Right *Kidney*, and in Appearance resembled the *Pancreatic Gland*. Another Portion, which was Cylindrical, and about two Thirds of an Inch in Diameter, passed streight over the Intestines, adhering strongly to that Part of the *Colon* which lies under the *Stomach*, and was inserted into the *Rectum*, in the *Pelvis*. Another Portion of this Substance passed directly over the *Intestines* to the *Pelvis*, but about the Middle of the *Abdomen* it sent out two smaller Portions, the one was inserted into the *Mesentery*, the other reflecting back, was inserted into the *Colon* on the left Side near the *Stomach*. As soon as I cut into one of these Portions, I discovered it to be a Part of the *Omentum* twisted up, and contained in a very thick capsular Membrane.

The *Diaphragm* was forced up so far by the Contents of the *Abdomen*, that the Cavity of the *Thorax* was decreased to near one Third.

The *Liver* was much larger than in a natural State, and of one intire Substance, and not divided into *Lobes*, the whole Convex Surface adhering firmly to the *Diaphragm*.

The *Stomach* was very small, as to its Cavity, but the *Coats* of it were increased to six times their natural Thickness (as were likewise all the *Coats* of the *Intestines* and *Mesentery*) and very much inflamed.

Two Thirds of the *Stomach* adhered to that Part of the *Diaphragm* which did not cover the *Liver*, and the other Part adhered to the concave Surface of the *Liver*; as did likewise the *Duodenum*, whose Cavity was

was very large. Below the *Duodenum*, the *Colon* adhered to the lower Part of the Concave Surface of the *Liver*, so that the whole *Liver* was contained in a kind of *Bursa* composed of the *Diaphragm*, *Stomach*, *Duodenum* and *Colon*.

The *Cæcum*, *Colon* and *Rectum* were much larger than in a natural State, and adhered so very strongly to the Parts over which they passed, that it was with much difficulty I could separate them.

The *Spleen* was not one Fourth of its natural Size, and one Half of its external Surface was entirely Cartilaginous.

The *Pancreas* was smaller than usual, as were likewise the *Kidneys*, *Ureters* and *Bladder*; and in the *Pelvis* of each *Kidney* there were small fabulous Concretions.

The left *Ovarium* was distended to so large a Size, as to fill the whole Cavity of the *Pelvis* up to the *Os Pubis*; its Surface was Cartilaginous, like that of the *Spleen*, and in it were contained a great Number of *Hydatides* of different Sizes, whereas the right *Ovary* was no ways diseased in the least.

The Difficulty and Pain complained of in the Expulsion of the *Fæces*, naturally arise from the Pressures on the diseased *Ovarium*, at the same time that its increased Bulk, by compressing the *Intestinum Rectum* impeded the Egrefs of the *Fæces*, and brought on the Inflammation of the *Intestines*, which we observed.

The *Prolapsus Uteri*, and the Incapacity of the *Bladder's* retaining a proper Quantity of *Urine*, were likewise occasioned by the Pressures of this diseased *Ovarium* upon those Parts.

But what seems most material in this Case, is the viscid Matter found in the Cavity of the *Abdomen*; which as the Waters were originally incysted in the *Ovary*, was properly extravasated from the *Cystus* into the *Abdomen* in the two last Operations; by which, as well the Quantity drawn off as the customary Relief, were very much diminished; in lieu of which the *Stimulus*, from such a Fluid, might reasonably bring on the Vomiting observed from that time.

Quer. Therefore, if such a Vomiting ensuing the Operation is not a fatal Symptom?

Quer. If any Method can be found to prevent such Extravasations?

The Relations of this Gentlewoman are of Opinion, that her Disease was occasioned by pulling off her Cloaths, when she was very hot, to go into a Bathing-Tub of Water to cool her, when finding the Water excessive cold, she put only her Legs in, the other Part of her Body being out of the Water, and naked at the same time; which happened a few Weeks before she perceived the Swelling and Pain in her *Pelvis*; and probably this might be the Cause. As the Constriction of the lower Parts by the cold Water might, in a great measure, impede the *Fluids* circulating through the lower Parts, and the Blood being at the same time rarified and expanded by the Heat, might therefore burst through the more tender *Lymphatics*, and produce the Extravasation.